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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/521,003	11/21/2005	Tae Seok Moon	CMT-0007	4859
23413 CANTOR COL	7590 07/24/200 BURN, LLP	8	EXAMINER	
20 Church Street			BLAND, LAYLA D	
22nd Floor Hartford, CT 06	5103		ART UNIT	PAPER NUMBER
			1623	
			MAIL DATE	DELIVERY MODE
			07/24/2008	PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	10/521,003	MOON ET AL.	
mierview Summary	Examiner	Art Unit	
	LAYLA BLAND	1623	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>LAYLA BLAND</u> .	(3)		
(2) <u>Amy Bizon-Copp</u> .	(4)		
Date of Interview: <u>17 July 2008</u> .			
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant 2	2) <mark> applicant's representative</mark>	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) <u></u> No.		
Claim(s) discussed:			
Identification of prior art discussed:			
Agreement with respect to the claims f) was reached. g	ı)∏ was not reached. h)⊠ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <i>Ms. Bizon-Copp confirme</i> (A fuller description, if necessary, and a copy of the amendallowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached. THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW DATE, OR THE SUBSTANCE OF THE INTERQUIREMENT OF THE SUBSTANCE OF THE INTERQUIREMENTS on reverse side or on attached sheet.	Iments which the examiner agopy of the amendments that vid.) ACTION MUST INCLUDE THE last Office action has already OF ONE MONTH OR THIRT'ERVIEW SUMMARY FORM,	reed would render the description of the least substance of the leas	er the claims claims OF THE LICANT IS HIS
Examiner Note: You must sign this form unless it is an	/Layla Bland/ Examiner, Art Unit 1623 Examiner's signature, if requi	red	

Application No.

Applicant(s)